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ORGANIZATIONAL CAPACITY ASSESSMENT REPORT

FOR NN ROUND THREE PARTNER
ATK FIELD OFFICE
K

MAY 2009

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CB, OD SPECIALIST, NP

The information contained in this report is the product of an assessment conducted by the New Partners Initiative Technical Assistance Project (NP). The organizational capacity assessment component is led by II Inc. in collaboration with JJ Inc. and the United States Agency for International Development (USAID). The report was prepared by NP, a project implemented by JJ Inc. under Task Order No. GHS-xxx issued by USAID under the auspices of the President's Emergency Plan for AIDS Relief (PEPFAR).

DISCLAIMER

The views expressed in this publication do not necessarily reflect the views of the United States Agency for International Development or the United States Government.

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Abbreviations

| | |
|--------|--|
| AIDS | Acquired Immunodeficiency Syndrome |
| ATK | Ananda Marga Universal Relief Team |
| CBO | Community Based Organization |
| HBC | Home Based Care |
| HIV | Human Immunodeficiency Virus |
| HQ | Head Quarters |
| ICT | Information and Communication Technologies |
| JJ | JJ Incorporated |
| M&E | Monitoring and Evaluation |
| NGO | Non-Governmental Organization |
| NN | New Partners Initiative |
| NP | New Partners Initiative Technical Assistance Project |
| OCA | Organizational Capacity Assessment |
| OVC | Orphans and Vulnerable Children |
| PEPFAR | President's Emergency Plan for AIDS Relief |
| TA | Technical Assistance |
| USAID | United States Agency for International Development |
| USG | United States Government |
| VAT | Value Added Tax |

ORGANISATIONAL CAPACITY ASSESSMENT (OCA) REPORT
ATK FIELD OFFICE, K
MAY 20-22, 2009

OCA REPORT WRITTEN BY:
CB

ASSESSMENT TEAM:
CB
BD
EB
CM

1. Background

The New Partners Initiative was developed to expand the reach of HIV and AIDS prevention and care programs by providing funding opportunities to organizations with established presence in local communities but no prior experience managing USG funds. A key objective of the New Partners Initiative is to build the capacity of these organizations to: 1) manage grants from the USG and comply effectively with USG regulations and requirements; 2) develop their organizations into stronger entities that will be able to better source USG and other funding and continue and/or expand programs after the NN grant comes to an end; and 3) strengthen the ability of the organizations to implement high quality HIV and AIDS programs.

2. Organizational Capacity Assessment Process

To support the selected organizations, USAID has awarded a contract to JJ, Inc. (JJ) assisted by II Inc. That support starts with an analysis of the current capacity of the organization measured through a capacity assessment, conducted in partnership with the implementing organization. The organization capacity assessment or OCA uses an interactive tool to assist organizations to identify their status on seven management elements: governance, administration, human resource management, financial management, organizational management, program management, and project performance management. The elements and their subsections measure organizational strengths and challenges and ability to comply with USG administrative, financial and programmatic regulations and procedures. The outcome is a quantitative baseline to guide future operations and a detailed plan of actions to undertake over the next year to strengthen those systems and procedures. The plan also pinpoints areas in which the technical assistance of the NN project is desired. The OCA is meant to be repeated annually to show growth over time. To get a full range of inputs, a sample of staff and board members are asked to fill out questionnaires and provide them to the OCA team. The staff contributes by reflecting their knowledge and use of the mission and vision statement; their participation in planning exercises, awareness of administrative and human resource policies. Board members provide details on the leadership, responsibilities and commitment to the organization.

3. Organizational Overview

ATK is a field office for ATK HQ whose headquarters are in RM. ATK K is a voluntary organization, registered in 1993 as a non-profit organization. ATK K prides itself on its ability to provide affordable HIV/AIDS treatment and healthcare to communities in NI, Mombasa, and Kisumu. The organization's activities have been focused on long term development projects, disaster relief, and community service. These include supplying foodstuff, clothing, medicines, water pumps, and other relief materials to victims of famine and political violence. The

organization also has several HIV/AIDS healthcare centers for the poor in K. The organization carries out activities in partnership with development partners, government, CBOs, local NGOs, and intended beneficiaries in implementation of projects. ATK K currently has fifteen ongoing projects reaching approximately 50,000 beneficiaries. Some of the projects include healthcare centers in NI and Mombasa, Mahaya Hospital in Kisumu, an HIV/AIDS OVC care program, prevention of mother to child transmission of HIV in NI, Vocational Training Center for HIV/AIDS Infected and Affected Vulnerable Children in NI, a training program for healthcare professionals, the K Integrated HIV/AIDS Program, and a PLWHA IGA Program. Currently, ATK K has over ninety staff in the different projects. ATK K consists of a small team of full time paid professionals, with the larger part of the team consisting of volunteers. ATK donors include the Embassy of Japan, Prakesh Patel Foundation, Embassy of Egypt, ATK Italy, ATK HQ, Lions Greater, Pfizer Austria, and individuals.

Under the NN project, ATK K will support 3,000 orphans, 1,000 HIV patients and around 1 million people in prevention and awareness on HIV infection. A series of training programs will be held for 120 OVC counselors, ninety HBC counselors, ninety community resource personnel, eighteen chiefs, children officers and paralegal personnel. There will be nine youth vocational training centers targeting 900 youth. Nine youth clubs attached to well-established libraries that have TV and media information will be opened for youth prevention activities.

4. OCA Implementation Description

4.1. OCA Participants

| NP | ATK K | ATK HQ | USAID |
|---|---------------------------------|---------------------------|--|
| CB | Dr. EK | PS | AA |
| NP (<i>Organizational Management, Program Management</i>) | <i>Project Coordinator</i> | <i>Executive Director</i> | <i>Contract Specialist</i> |
| BD (<i>Governance, Project Performance Management</i>) | JN | HA | JW |
| | <i>Finance Manager</i> | <i>Volunteer</i> | USAID K |
| | MMM | <i>M&E Specialist</i> | <i>Programme Development Assistant</i> |
| CM (<i>Human Resource Management</i>) | EO | | |
| | <i>Administrative Assistant</i> | | |
| EB (<i>Administration, Finance Management</i>) | Board Member | | |
| | IP | | |
| | <i>Technical Advisor</i> | | |

4.2. OCA Process

The NP team led the Organizational Capacity Assessment process during the period of May 20-22, 2009 at the ATK K office located in the ATK Health Care Center, NI. The full ATK team participated in all sections except for Administration and Project Performance Management, for which two parallel sessions were held. A board member/technical advisor participated in some of the sessions. Following the last section, ATK reviewed and discussed the findings from the rationale and score sheets. The action planning process then proceeded; the NP team prepared the issues and suggested actions for ATK's review. The action planning process was very

interactive; ATK's staff review led to additions and clarifications on both issues and actions and eased the assigning of responsibility. EO took on the role of monitoring the action plan progress.

5. OCA Findings

5.1. OCA Scores

In composite, ATK K scored 2.3/4.0 on the OCA. The score on areas related to compliance with USG regulations was 2.5/4.0; the score without rankings on USG categories was 2.2. The highest score was on financial management (2.7), reflecting the synchronization of financial management issues from ATK HQ following the OCA and participation in the round 3 launch meeting. The lower scores were on Human Resource Management (2.1) and Program Management (2.2), which were mainly affected by a lack of consistency in application and documentation of processes. Project Performance Management scored lowest (1.8), mainly due to lack of standardization of systems across the program. It was also affected by the fact that the project has not yet started actual implementation; it is still in the start-up phase and the work plan is not yet approved.

5.2. Summary of Issues

5.2.1. Governance (Capacity Score: 2.4)

The mission of ATK is generally known and staff understand their roles; however, the role of a board in K has not been thoroughly explored to benefit the organization. There is general awareness of the mission and vision by staff in the NI office, but less so in the field offices. A display of the vision and mission in strategic places would help to increase clarity and knowledge amongst field staff. Although the vision and mission are reviewed annually at the headquarter level, it is rarely applied or referred to in the decision making process at ATK K.

There is a documented organogram; however, it does not clearly delineate lines of supervision or specify the organization's functions, particularly in the areas of administration and human resources. The five members of the current board operate informally with no scheduled meetings or minutes. The development of Terms of Reference to engage the board in strategic activities, such as fundraising and networking, would go a long way in benefitting ATK K. ATK K is legally registered as an NGO and complies with all of the labor and tax obligations for operation in K. Although the programs are running smoothly, the organization is highly dependent on the Executive Director, with no set plan for project continuity regarding staff. The development of a succession plan would help to ensure program continuity in the case of any unforeseen changes in leadership.

5.2.2. Administration (Capacity Score: 2.4)

ATK currently has Administrative, Finance and Procurement, HR, and Volunteer Manuals, wherein some key administrative issues are discussed. However, it is difficult to locate the information because it is either incomplete or not fully compliant with USAID rules and regulations.

The manuals developed by ATK HQ are being used as templates and will be reviewed and revised as required by the country programs. The Operations Manual needs to be developed to document those critical areas of control which are currently either lacking or inadequately documented at ATK. This includes office operations such as mailing, faxing, photocopying, stationery, safety and security procedures, ICT and document management, vehicle HQge and

management, hiring and managing consultants, advances, travel and per diem procedures (including submission of travel expense reports and/or trip reports), fixed asset control, and marking and branding.

Once the manuals have been developed or revised, management should roll out the templates and organize trainings on HQ rules and regulations for staff involved in the NN project to ensure compliance. A cost allocation policy needs to be developed and documented to ensure that shared costs are equitably allocated to the different projects.

5.2.3. Human Resources (Capacity Score: 2.1)

ATK K is in the process of reviewing and documenting human resource management practices. The Human Resource and Volunteers Manuals are currently under review. ATK K is also working according to their recruitment schedule to ensure that staffing levels that are required by the project are achieved. A key focal area is the development of a comprehensive performance management system that will be critical to the whole organization. While ATK K systematically follows a transparent recruitment process that includes internal and external advertising, there is need for the development and implementation of comprehensive recruitment procedures. These procedures should further be supported by a detailed retention strategy to reduce the potential for the loss of talent and skills. It is recognized that in order to continue building a supportive working environment there is need to address the development of standardized job descriptions, a clear performance management system, and a salary structure. Time sheets and bio data sheets, which are USG compliance requirements, should be finalized.

Since ATK K has only recently started to engage paid employees, the organization should work towards developing and documenting a reward management strategy. This should include the development of a salary structure, a review of the current employee benefits, as well as the development policies that will support the strategy.

5.2.4. Financial Management (Capacity Score 2.7)

ATK K has developed and documented financial management policies and procedures in a manual which was updated in March 2009. While a good effort has been made to develop financial policies and procedures, in several cases they are not fully compliant with USAID rules and regulations. For example, there is no signatory approval/authorization matrix, the definitions of cost principles are lacking, VAT exemption guidelines are missing, and monitoring and supervision guidelines for field offices' financial processes has not been fully developed or documented.

The ATK K chart of accounts is currently being revised to include codes for VAT and unallowable costs. Quick-books has been introduced as the financial software for the K office. Financial reporting, budget monitoring, cash flow management practices, and an exchange rate, amongst other financial control and reporting policies, are still to be developed. Audits occur on an annual basis and the Board closely follows up to ensure that audit recommendations are instituted in a timely manner. ATK needs to document its policy on responding to audit findings and dissemination of the findings to management. The audit process as prescribed under Circular A-133 must also be incorporated into the manual.

ATK K has a high cost share obligation, and hence has a need to develop and document a cost share strategy to include identification of allowable cost centers, documentation requirements, reporting, and tracking for compliance. To this end, the finance manual in its current form can be

improved. ATK should work on updating the finance manual to address compliance and the best practice issues noted above. The financial system, including the establishment of the chart of accounts and the signatory authority/approval matrix, must also be finalized as soon as possible.

5.2.5. Organizational Management (Capacity Score: 2.5)

ATK K adopts their organizational management practices from those set by the headquarters, but generally has not developed country-specific policies. While a strategic plan exists for ATK HQ, it has not been developed at the country level in K. There needs to be a detailed strategic planning session that is comprehensive and encompasses all aspects of ATK K. Similarly, the new change management policy that has been developed at ATK HQ needs to flow down to K. Currently, policies and procedures are developed to respond to situations that arise, but not in anticipation of changes that may occur. Changes in policies are driven and led by the Executive Director. ATK should consider a system that allows for consistent review of manuals, policies and processes, and one that generates staff input.

ATK K has nurtured good working relationships with various stakeholders, including government ministries and NGOs. As a result of the relations, staff have benefitted from trainings and sharing experiences. There is a clear internal system of sharing information across the organization. Monthly meetings with the field staff are held, during which there is sharing and reflection on experiences. Lessons learned are included in the work plans and action plans. It was noted that communication will further be improved if more team building activities are introduced and communication platforms within the organization are diversified. ATK K recognizes that there is need to develop and document mechanisms for sharing of information externally and building the network with partners and sub-partners.

ATK K has been able to attract several donors that support the different projects, but there is no systematic process of sourcing for donors. The organization has yet to assign the role of new opportunity development to anyone. There is need for a diverse strategy for program continuity that also includes income generating activities to reduce the risk of donor dependency.

5.2.6. Program Management (Capacity Score 2.2)

There are set processes for reporting, referrals, community involvement, culture, and gender needs assessments. There is a strong reporting structure within the organization, which includes weekly and monthly reports from the field, based on a standard template, that are reviewed by the central office in NI. Monthly staff meetings are held, during which program indicators are reviewed, feedback is provided, progress on action points is monitored, and next steps are agreed upon. ATK K is considering using the pre-award checklist in developing selection criteria for sub-partners. Reporting to USAID has thus far been limited, with only one semiannual report submitted.

Referral sites have been mapped out with Ministry of Health facilities and faith based organizations in Nyanza. There is an agreement with the Provincial Medical Office in Nyanza which allows for a relationship with all the facilities within this particular province. ATK K needs to identify referral sites for the different programs and in the different areas of operation. In addition, ATK K should consider developing a quality assurance system for assessing the different services offered at the referral sites. It was noted that ATK K needs to identify referral services being used by other projects under USAID. This will deter incidences of duplication or double counting. Community input is usually sought at the conceptualization level of projects. There is need to develop systematic guidelines for involving the community during concept

planning, implementation, monitoring, evaluation, and feedback; this will contribute to continuity of the project. Similarly, culture and gender issues are not deliberately and continuously incorporated into the organization's programs. ATK K needs to develop mechanisms for assessing local culture and gender issues relevant to its programs.

5.2.7. Project Performance Management (Capacity Score 1.8)

The NN work plan has been reviewed and submitted to USAID; it is awaiting approval. There are mechanisms for field oversight, including weekly plans and reports from the field and spot checks. The field work plans are in line with the NI head office work plan and this helps to assess achievement of targets. Provincial supervisors and community health workers conduct spot checks to ascertain that what is documented is actually on the ground, but this is mostly in the health education program. In addition, community group leaders are consulted to verify information provided by staff. ATK K has endeavored to instill values of discipline and honesty in all health workers /staff. For purposes of tracking, there are specific referral notes with unique codes that are used by field staff. ATK has a pre and post test for assessment of education provided. A tool should be developed that will ensure that service delivery and performance are regularly reviewed and feedback is provided. The tool could include a checklist for field oversight and to guide discussions with the field supervisors, as well as a basic fact sheet for community health workers.

The process of developing standards is ongoing. The standards are based on both national and USAID guidelines. ATK K should put in place mechanisms for confirming HQge, adherence, and awareness of standards amongst staff. This should be complemented by the development of support supervision guidelines and training supervisors accordingly. As part of quality assurance, there are standards for the clinical section; the process involves clients filling forms that are analyzed weekly and action is taken when necessary. There are no performance standards for other programs and no process to directly follow up. ATK K should document standards for performance for all program components and orient staff accordingly. Monitoring and evaluation are conducted, but there is no comprehensive tool to guide the process. The data collected are not necessarily used for learning. ATK K could consider initiating review of data amongst provincial offices so that there is learning across projects. The process could involve setting up a results management committee and agreeing on specific indicators for which data should be collected. A comprehensive M&E tool that covers the entire program, including PEPFAR indicators, should be developed and documented.

5.3. Technical Assistance and Support Requested

5.3.1. Suggested Technical Assistance

| | |
|---------------------------|---|
| Governance | <ul style="list-style-type: none"> • NP to provide governance training • NP to share succession plan example |
| Administration | <ul style="list-style-type: none"> • NP to review manuals and provide templates |
| Human Resource Management | <ul style="list-style-type: none"> • NP to review manuals and provide templates • NP to organize HR training • NP to share best practices on volunteer retention |
| Financial Management | <ul style="list-style-type: none"> • NP to review manuals and provide templates • NP to train in sub-partner management and provide guidelines for cost share |

| | |
|--------------------------------|---|
| Organizational Management | <ul style="list-style-type: none"> • None at the moment |
| Program Management | <ul style="list-style-type: none"> • NP to assess requirements for further support on community involvement during technical capacity assessment |
| Project Performance Management | <ul style="list-style-type: none"> • NP to organize M&E training |

5.3.2. NN Advisor

NP and ATK discussed the availability and potential roles of an NN Advisor. ATK K is excited about the NN advisor and is considering one for M&E. It was agreed that the recruitment process of an M&E officer for the NN project should first be finalized; then they will be able to determine the exact kind of advisor required.

6. Conclusion

ATK K is finalizing the start-up phase of the NN project and is optimistic about the success of the project despite the delay in approval of the work plan. ATK K will need to prioritize accurate estimation of targets for the project and documentation of a cost share strategy. In addition, there is need to strengthen systems across the program through establishment of guidelines, documentation, and consistency in implementation.

Annex 1: Score Sheet

| Section | | Sub-section | Score | Section Tally Average Score | USG Score |
|---|---|---|------------|--------------------------------|--------------|
| Governance | ● | Vision/Mission | 3 | 2.4 | |
| | ● | Organizational Structure | 2 | | |
| | ● | Board Composition and Responsibility | 1 | | |
| | ● | Legal Status | 4 | | |
| | ● | Succession Planning | 2 | | |
| Administration | ● | Office Policies, Procedures and Systems | 2 | 2.4 | |
| | ★ | Travel Policies and Procedures | 2 | | 2 |
| | ★ | Procurement | 3 | | 3 |
| | ★ | Fixed Assets Control | 3 | | 3 |
| | ★ | Branding/Marking | 2 | | 2 |
| Human Resources Management | ● | Job Descriptions | 2 | 2.1 | |
| | ● | Recruitment and Retention | 2 | | |
| | ● | Staffing Levels | 3 | | |
| | ★ | Personnel Policies | 3 | | 3 |
| | ★ | Staff Time Management | 2 | | 2 |
| | ★ | Staff Professional and Salary History Documentation | 2 | | 2 |
| | ● | Staff Salaries and Benefits Policy | 2 | | |
| | ● | Staff Performance Management | 1 | | |
| | ● | Volunteers/Interns | 2 | | |
| Financial Management | ● | Financial Systems | 3 | 2.7 | |
| | ● | Financial Controls | 3 | | |
| | ● | Financial Documentation | 3 | | |
| | ★ | Audits | 3 | | 3 |
| | ★ | Financial Reporting | 3 | | 3 |
| | ★ | Cost Share | 1 | | 1 |
| Organizational Management | ● | Strategic Planning | 1 | 2.5 | |
| | ★ | Work plan Development | 4 | | 4 |
| | ● | Change Management | 2 | | |
| | ● | Knowledge Management | 3 | | |
| | ● | Stakeholder Involvement | 3 | | |
| | ● | New Opportunity Development | 2 | | |
| | ● | Communication | 3 | | |
| | ● | Decision Making | 2 | | |
| Program Management | ★ | Donor Compliance | 2 | 2.2 | 2 |
| | ★ | Sub-grant Management | N/A | | N/A |
| | ● | Technical Reporting | 3 | | |
| | ● | Referral | 2 | | |
| | ● | Community Involvement | 2 | | |
| | ● | Culture and Gender | 2 | | |
| Project Performance Management | ● | NN Program Implementation Status | 1 | 1.8 | |
| | ● | Field Oversight | 2 | | |
| | ● | Standards | 2 | | |
| | ● | Supervision | 2 | | |
| | ★ | Monitoring and Evaluation | 2 | | 2 |
| | ● | Quality Assurance | 2 | | |
| AVERAGE Organizational Capacity Score | | | 2.3 | | |
| Average USG Grant Implementation Capacity Score | | | | ★ | 2.5 |
| Average Organizational Capacity Score without USG Sub-sections | | | | 2.2 | |

Annex 2: Action Plan

| ATK K OCA Action Plan | | | | OCA Dates: | | May/22/2009 | | |
|---|--|--|--------------------|--|----------------|-------------|-------------------------|---------|
| Action Plan Monitoring Strategy (person responsible for monitoring progress of action plan): EO | | | | | | | | |
| Section | Issue | Action | Person Responsible | TA/Support Desired | Priority Level | Timeline | Status of AP Item at FU | FU Date |
| Gov/ Mission | The Mission/Vision is not widely known and it is not always referred to in planning & decision making | Mission/Vision needs to be displayed in all offices and systematically referred to | Kumar | None at this time | M | 30-Jun-09 | | |
| Gov/ Org Structure | Organogram does not clearly define roles, responsibilities, communication etc | Revise the Organogram & include the support functions | Kumar | None at this time | H | 30-Jun-09 | | |
| Gov/ Succession plan | While a board exists, it is run informally | Consider developing TOR and having board participate in governance training | Illa | NP to provide governance training | M | 30-Dec-09 | | |
| Gov/ Succession plan | ATK K is over dependent on its Director | Consider reviewing roles and responsibilities of existing staff and developing a succession plan/process | Kumar | NP to share succession plan example (ARC) | M | 30-Dec-09 | | |
| Admin/ OP | Documented administrative policies and procedures exist but they are neither complete nor in compliance with USG rules and regulations | Finalize Admin manual | Joseph | NP to review manuals & in-house short term consultant | H | 30-Oct-09 | | |
| Admin/ Travel | ATK K does not have a consolidated travel policy that caters for all aspects of travel | Amend travel policies and procedures to be more comprehensive and USG compliant | Joseph | NP to review manuals & in-house short term consultant | H | 30-Jun-09 | | |
| Admin/ Proc | Documented procurement guidelines exist but are not clear re: threshold and signatory approval | Current administrative manual to be reviewed and revised as required | Joseph | NP to review manuals & in-house short term consultant | H | 30-Jun-09 | | |
| Admin/ Fixed Asset | Fixed Assets policy lacks billing guidelines for shared equipment between different projects | 1. Develop and document a billing system for shared costs. 2. Introduce after sales maintenance contracts with suppliers. | Joseph | NP to provide templates & in-house short term consultant | H | 30-Jun-09 | | |

| | | | | | | | | |
|----------------------|--|--|--------|--|---|-----------|--|--|
| HR/JD | Current job descriptions do not specify the skills required | Review job descriptions and include required skills | Evelyn | NP to review & provide examples as requested | M | 30-Jul-09 | | |
| HR/JD | There is no clear process for job description review. | HR Manual should detail a process for job description review | Evelyn | NP is reviewing the manual and will provide guidelines – Caroline M. | M | 18-Jun-09 | | |
| HR/ Recruit& Retain | There are no documented recruitment and retention procedures. | 1. Complete the HR manual and ensure that a comprehensive recruitment policy is included. 2. Document reference checks and exit interviews, analyze reasons for leaving to improve retention. | Evelyn | NP is reviewing the manual and will provide guidelines - Caroline M | M | 18-Jun-09 | | |
| HR/ Personnel policy | Incomplete HR Manual | Complete the development of HR manual and ensure that the content is USG compliant | Evelyn | NP is reviewing the manual and will provide guidelines - Caroline M | M | 18-Jun-09 | | |
| HR/ Drug free | The policy has been written and shared however staff have not signing off | Ensure that all staff sign off drug free policy | Peter | None | H | 18-Jun-09 | | |
| HR/ Staff time | The time sheets are not USG compliant re: no individual filling of timesheets and time by project not recorded | Review the time sheet implemented and ensure that it is USG compliant | Joseph | NP completes review by 22/May 2009 | H | 18-Jun-09 | | |
| HR/ History | Bio data forms have not been used to capture and or track employee salary history | complete the development of bio data forms to ensure that all relevant information is captured for new employees | Evelyn | None at this time | H | 18-Jun-09 | | |
| HR/ Salaries | There is no documented salary structure used to determine employee salaries | Develop and document a salary structure. | Kumar | HR training by NP | M | 30-Aug-09 | | |
| HR/ Perform Mgt | There is no clear performance management system | The HR manual should include a comprehensive performance management system Orient staff on use | Evelyn | NP is reviewing the manual and will provide guidelines - CM. | H | 18-Jun-09 | | |

| | | | | | | | | |
|--------------------|---|---|--------|---|---|-----------|--|--|
| HR/ Volunteer | Volunteer manual lacks a detailed retention strategy. | Develop and document strategies to retain volunteers. | Kumar | NP to share best practices from other partners | M | 30-Jul-09 | | |
| Fin/ Systems | Incomplete financial manual that is not USG compliant | 1. Finalize the financial manual and ensure that it includes guidance on foreign exchange computations. 2. Finalize the chart of accounts in compliance with USG requirements. | Joseph | NP reviewing manual - EV | H | 15-Jun-09 | | |
| Fin/ Controls | Existing financial controls do not document signatory authority / approval matrix. | Develop and document signatory authority / approval matrix | Peter | None at this time | M | 5-Jun-09 | | |
| Fin/Doc | Invoices are not stamped "PAID" | Purchase a "PAID "stamp and ensure that documents are stamped accordingly to avoid double payment. | Mutuku | none | H | 30-May-09 | | |
| Fin/ Audits | While annual audits have been conducted findings are not shared with all members of the management team only the board reviews findings | Disseminate audit findings to relevant staff. | Kumar | none | L | 30-Apr-10 | | |
| Fin/ Reports | Spot checks are not conducted | Conduct and document spot checks e.g. cash counts | Joseph | none | M | 30-Jun-09 | | |
| Fin/ Cost Share | There are no written guidelines for recording cost share. | Develop mechanisms for documenting cost share | Peter | NP to train in sub partner mgt and provide guidelines | H | 30-Jul-09 | | |
| OM/ Strategic plan | There is no strategic plan | develop a strategic plan for ATK K | Peter | none | L | 1-Jun-10 | | |
| OM/ Change Mgt | Response to change is reactive | ATK HQ to share change management policy | Peter | NP HR Training | M | 30-Jun-09 | | |
| OM/ Knowledge Mgt | Currently ATK is weak on incorporating findings on learning from training, partner meetings and programs into their operations | 1. Set time for reflection of new input and how to use in operations. 2. Seek opportunities for new learning 3. Ensure membership in Mission implementing Partner meetings / OVC meetings | Evelyn | none | M | 30-Jul-09 | | |

| | | | | | | | | |
|---------------------------------|---|--|-----------|---|---|-----------|--|--|
| OM/ New Opportunity Development | There is no deliberate focus on new opportunity development | Develop and document a strategy for program continuity which includes income generating activities. | Peter | none | L | 1-Jun-10 | | |
| OM/ Communication | Communication between field and head office is still a challenge | 1. Review current communication channels between head office and field 2. Introduce team building activities into program | Evelyn | none | M | 30-Jun-09 | | |
| OM/ Decision Making | Decision making processes are not consistently documented | Diversify the communication platforms to enable staff to either contribute to or be informed on decision making processes e.g. staff bulletin. | Dr.K | none | M | 30-Jun-09 | | |
| PM/ Donor Compliance | Office has not yet requested for VAT exemption from the mission. | Seek guidance on VAT exemption from the USAID mission K | Joseph | USAID mission K to give guidance (JW) | M | 18-Jun-09 | | |
| PM/ Donor Compliance | USG rules and regulations have not been fully integrated into ATK manuals | Complete the reviewing process of the manuals and ensure they are USG compliant. | see above | | | | | |
| PM/ Referral | ATK not aware of USG funded programs in project area | coordinate with the mission to identify USAID funded sites | Dr.K | List from USAID mission K - JW | M | 30-Jun-09 | | |
| PM/ Referral | No existing mechanisms for monitoring quality of service at the referral sites | develop a system of assessing the quality of services received at the referral sites | Dr.K | Specific support to be identified during the TCA | M | 30-Dec-09 | | |
| PM/ Community Involvement | While there is adequate involvement of the community, there are no written guidelines that are shared across the organization | Develop a system that consistently involves the community at all levels of the program | Kumar | Specific support to be identified during the TCA (identify community involvement tools) | M | 30-Dec-09 | | |
| PM/ Culture & Gender | While culture and gender is considered in programming there are no written guidelines on how to incorporate culture and gender into all aspects of program activity | 1. develop tools to assess culture and gender roles 2. Document HQge 3. Incorporate findings into program implementation | Kumar | Specific support to be identified during the TCA | M | 30-Dec-09 | | |

| | | | | | | | | |
|---|---|---|--------|--|---|-----------|--|--|
| PPM/ Field Oversight | While field oversight does occur, it is not formalized, documented or consistent | Review current practice and document process for field support and oversight | Dr.K | NP to share information on sub partner mgt | M | 30-Jul-09 | | |
| PPM/ Stds | Incomplete service delivery standards | 1. Finalize standards across the program, 2. Orient staff, 3. Develop mechanisms for assessing adherence amongst staff | Dr.K | Specific support to be identified during the TCA | | 30-Jan-10 | | |
| PPM/ Supervision | No definitive plan for how supervisors will monitor application of standards nor how supervisors will be identified / trained | Develop and document support supervision guidelines | Evelyn | NP HR Training | M | 30-Aug-09 | | |
| PPM/ M&E | No documented plan for M &E across the program | 1.Develop and document M & E plan that includes PEPFAR indicators 2. Develop a system for analysis and HQge of results at all levels | Kumar | 1.NP M & E Training 2 Draft SoW for NN M & E advisor (BD & Naomi) | H | 30-Jun-09 | | |
| PPM/ QA | While QA exists for clinical work, QA plan for general program does not exist | Develop and document QA Plan that covers all elements of the program | Dr.K | 1.NP to support process 2. Share yellow star manual from Uganda 3. NP to innovate ways of certification/ recognition for NN partners | M | 30-Sep-09 | | |
| Participants <div> <div> ATK: PS IP Dr. K HA JN MMM EO </div> <div> NP: BD CB CM EB USAID: AA JW </div> </div> | | | | | | | | |

Annex 3: OCA Evaluation Comments

5 evaluation forms were received

| Questions | # responses | Detailed Responses |
|---|-------------|--|
| Did the OCA process allow a fair assessment of your organization: | 5/5 | <ul style="list-style-type: none"> • It helped to give a wider view of the organization • It enables us to explore all levels of organizational expression at one time • We had the opportunity to score ourselves after answering questions openly • It's a step of recognizing the organization's level of performance, strengths, weaknesses as well as having a common goal in implementation process • Thanks a lot. The OCA opens our system and minds |
| Do you feel the members of your organization were adequately included in the assessment process | 5/5 yes | <ul style="list-style-type: none"> • All the management staff were there. Board was well represented • Yes, although we missed the presence of the ATK K Director and field staff • Every department was well handled and adequately informed. We all participated as a team which made us informed of what happens in each department • I suppose the members involved in the OCA are in the management team and most of the issues touched on the same |
| Do you feel the agreed action plan will help your organization address issues and grow | 5/5 yes | |
| What do you think worked well in this process | 5/5 | <ul style="list-style-type: none"> • We got to know areas to improve on, board level, administrative and finance • I was happy to see the Kn staff actively participating and welcome to the openness of the process • The fact that we can get NP advisors for M & E/ OVC/F&A to support our people was quite exciting • Time management, efficient information flow • The whole process considering our score. We need to do more • It was very enlightening and I can't wait for the next OCA meeting |
| What did you not like about the process | 2/5 | <ul style="list-style-type: none"> • The USAID Washington representative did not participate • Being misquoted in some commentaries |
| What would you change | 1/5 | <ul style="list-style-type: none"> • The scoring range should be widened from 1-10 |
| Other comments or suggestions | 5/5 | <ul style="list-style-type: none"> • The NP team portrays a lot of professionalism and willingness to share their valued expertise. Keep up the good work • I think the process works well but follow up would be greatly appreciated • Let's have OCA every 6/12 months to ensure adherence to high standards for NN partners • This was a wonderful session and we long/ anticipate the next assessment process • Thanks, we appreciate your support in building our organization to be better in the future |

Annex 4: OCA Board Questionnaires

The board questionnaires were not completed.

Annex 5: OCA Staff Questionnaires

Respondents = (12 technical)

| | | | |
|---|--|---------------------------------|--------------------|
| Please indicate your position (check the appropriate function in the box to the right): | Technical _____ Administrative _____ Financial _____ Management _____ | For TA Provider Use Only | |
| 1. Are you aware that your organization has a vision (future aspiration) and/or mission statement (purpose) | Yes(4) | No(8) | Vision/Mission |
| 2. What is the key message of the statement(s)? <ul style="list-style-type: none"> To help individuals, community based organizations and the community at large, harness resources for securing the basic requirement of life To provide quality healthy services to its patients | | | Vision/Mission |
| On a scale of 1 (strongly disagree) to 5 (strongly agree), rate the following statements by circling the number that best represents your response. | | | |
| 3. My organization... | Strongly disagree-----Strongly agree | | |
| A. Has staff meetings, which I find satisfactory | 1(7) 2(4) 3 4(1) 5 | Communication | |
| B. Does a good job of informing me about decisions | 1(8) 2(1) 3(2) 4(1) 5 | Decision Making | |
| C. Routinely seeks and listens to my ideas | 1(8) 2 3(2) 4(2) 5 | Decision Making | |
| 4. My organization <u>routinely</u> involves me in... | Strongly disagree-----Strongly agree | | |
| A. Workplanning | 1(7) 2(1) 3(2) 4(1) 5(1) | Workplanning | |
| B. Strategic planning | 1(7) 2(2) 3(3) 4 5 | Strategic Planning | |
| C. Policy development or review | 1(7) 2(3) 3(2) 4 5 | Change Management | |
| D. Best practices sharing | 1(7) 2 3 4(5) 5 | Knowledge Management | |
| 5. I feel comfortable raising issues about the organization or its programs with my supervisors? | 1(8) 2 3(1) 4(2) 5(1) | Communication | |
| 6. Does your organization have travel policies? | Yes | No(7) | Not sure(5) |
| 7. Do you know how to access the policy if needed | Yes | No(10) | Not sure(2) |
| 8. Do you fill out time sheets with daily hours of work | Yes(8) | No(4) | Not sure |
| 9. Do you fill out forms to claim reimbursement for work expenses | Yes(1) | No(9) | Not sure(2) |
| 10. Do you have a copy of your current job description | Yes | No(12) | Not sure |
| 11. Do you have a copy or know where to access a copy of your organization's personnel manual | Yes | No(11) | Not sure(1) |
| 12. Did you provide a signature to indicate you received and read the personnel manual | Yes | No(12) | Not sure |
| 13. In the last 12 months, have you received feedback from your supervisor on your performance? | Yes(1) | No(10) | Not sure(1) |